PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrects maintenance fee notifica	ed below or directed off tions.										
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
89415		V2010				Cer	tificate	of Mailing or Trans	missi	ion	
Smart & Biggar P.O.Box 2999, Station D 900-55 Metcalfe Street						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Story ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.					
Ottawa, ON K1P 5Y6 CANADA						(Depositor's name)					
CANADA										(Signature)	
										(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVEN	TOR		ATTO	RNEY DOCKET NO.	CC	ONFIRMATION NO.	
10/787,297	02/27/2004		Hao Xue			51085-6		51085-6 /SLB	85-6 /SLB 6561		
TITLE OF INVENTI FUNCTIONALITY	ON: METHOD, SYS	TEM,	AND DEVICE	FOR SPECIFYIN	iG :	SELECTIVE OV	ERRIE	E OF DO-NOT-D	ISTU	RB	
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE I	OUE	PREV. PAID ISSU	FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO		\$1510	\$300		\$0		\$18101816 11/09/201		11/09/2010	
EXAMINER		ART UNIT		CLASS-SUBCLASS							
NGUYEN, TUAN HOANG			2618	455-090200							
1. Change of correspondence address or indication of "Fee Address" (2 FR 1.563). Change of correspondence address (or Change of Corresponden Address from PTOSB/122) attached. Tee Address' indication (or "Fee Address' Indication form PTOSB/18) fix 60-502 or more recent) attached. Use of a Custom Number is required.				2. For printing on the patent front page, list (1) the aames of up to 1 registered patent attorneys cr agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agent. If no name is inted, no name with per printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) RESEARCH IN MOTION LIMITED WATERLOO, ONTARIO, CANADA									ent has been filed for		
Please check the appropr	iate assignee category or	catego	ories (will not be pr	inted on the patent):		Individual 🖾 Co	orporati	on or other private gr	oup er	ntity 🗖 Government	
Advance Order -	To small entity discount p	ed)	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge decopying (fee(s)) any deficiency, or credit any overpayment, to Deposit Account Number ∫ 122-530 (reactoise an extra copy of this form).								
	s SMALL ENTITY state	ıs. See	37 CFR I.27.					FITY status. See 37 C			
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) ites Pat	will not be accepte ent and Trademark	d from anyone other the Office.	han t	he applicant; a regi	stered a	attorney or agent; or the	ne ass	ignee or other party in	
Authorized Signature	_/Paul den	Во	ef/			Date	N	lovember 9	, 2	010	
Typed or printed nam	ef			Registration N	io 6	2,415					
This collection of inform an application. Confiden submitting the complete this form and/or suggests Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 d application form to the ons for reducing this bu (irginia 22313-1450. DC (13-1450.	FR 1.3 U.S.C USPT rden, sl O NOT	11. The informatis . 122 and 37 CFR O. Time will vary hould be sent to th SEND FEES OR	on is required to obtain 1.14. This collection i depending upon the e Chief Information C COMPLETED FORM	n or r is est indiv Office IS TO	etain a benefit by t imated to take 12 i idual case. Any er, U.S. Patent and D'THIS ADDRESS	he publ minutes mment Traden i. SENI	tic which is to file (and to complete, including son the amount of times of the order of the order of the ord	I by to ng gat me yo artme for P.	he USPTO to process) hering, preparing, and ou require to complete ent of Commerce, P.O. atents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.